

#### WCA GROUP HEALTH TRUST

# Renewal for School District of La Crosse (7/01/19)

	Current P	lan Benefits	Renewal F	Plan Benefits
PPO Network	Alliance/PHCS		Alliance/PHCS	
	PPO		PPO	
Deductible	Embedded		Embedded	
Prior Authorization	Standard		Standard	
In Network	\$1,600/\$3,200		\$1,600/\$3,200	
Out of Network	\$3,200/\$6,400		\$3,200/\$6,400	
Coinsurance				
In Network	80%		80%	
Out of Network	5	0%	50%	
Maximum Out of Pocket				
(Ded/Coins/& Medical Copays)				
In Network	\$ 4,800	0/\$ 9,600	\$4,800	)/\$9,600
Out of Network	\$16,800/\$33,600		\$16,800/\$33,600	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Hospitalization	Ded/80%	Ded/50%	Ded/80%	Ded/50%
Office Visit(s)	\$25/Ded/80%	\$100/Ded/50%	\$25/Ded/80%	\$100/Ded/50%
Specialist Office Visit(s)	\$50/Ded/80%	\$150/Ded/50%	\$50/Ded/80%	\$150/Ded/50%
Chiropractic Office Visits(s)	\$25/Ded/80%	\$100/Ded/50%	\$25/Ded/80%	\$100/Ded/50%
Preventative Exams	100%/Ded waived	\$100/Ded/50%	100%/Ded waived	\$100/Ded/50%
PT/OT/ST/RT	\$25/Ded/80%	\$100/Ded/50%	\$25/Ded/80%	\$100/Ded/50%
Urgent Care	\$50/Ded/80%	\$50/Ded/50%	\$50/Ded/80%	\$50/Ded/50%
Emergency Room Care	\$150/Ded/80%	\$150/PPO Ded/80%	\$150/Ded/80%	\$150/PPO Ded/80%
Psych/Chem/Alcohol	\$130) B Ca) B O / B	ψ230/11 0 B αμ/ ασ/σ	\$ 25 0/ B 00/ 02/2	<b>4200</b> /.1000000
Office Visit	\$25/Ded/80%	\$25/PPO Ded/80%	\$25/Ded/80%	\$25/PPO Ded/80%
Inpatient	Ded/80%	Ded/50%	Ded/80%	Ded/50%
Outpatient	\$25/Ded/80%	\$25/PPO Ded/80%	\$25/Ded/80%	\$25/PPO Ded/80%
All Other Medical Services	Ded/80%	Ded/50%	Ded/80%	Ded/50%
High Tech Imaging Coverage	\$100/Ded/80%	\$100/Ded/50%	\$100/Ded/80%	\$100/Ded/50%
Oral Surgery	Ded/80%	Ded/50%	Ded/80%	Ded/50%
Extraction/Replacement of Teeth				
	Ded/80%	Ded/50%	Ded/80%	Ded/50%
T. I. C	Limited to \$1500/benefit period		Limited to \$1500/benefit period 100%	
Teladoc Coverage	100%		(Adding Behavioral Health Coverage)	
(Incl. Behavioral Health)			(Adding benaviore	ii rieditii Coverage)
Pharmacy Drug Plan	¢0/10/20/60 _	20 Days Rotail	\$0/10/30/60 -	- 30 Days Retail
Didg Fiair	\$0/10/30/60 – 30 Days, Retail \$0/30/90/180 – 31-90 Days, Retail		\$0/10/30/60 – 30 Days, Retail \$0/30/90/180 – 31-90 Days, Retail	
	\$0/20/60/120 – 90 Days, Mail		\$0/20/60/120 – 90 Days, Mail	
	Specialty Limited to 30 Days		Specialty Limited to 30 Days	
Maximum Out of Pocket-Rx Only	\$1,800/\$3,600		\$1,800/\$3,600	
Waiver of Premium	Yes		Yes	
Trained by Francisco				

Michael Lamont, COO

## YOUR RENEWAL REFLECTS THE FOLLOWING COVERAGE UPDATE:

#### ORAL SURGERY BENEFIT

The following oral surgical procedures are to be covered, including necessary x-ray and laboratory tests:

- (1) Excision of partially or completely impacted teeth;
- (2) Excision of tumors and cysts of the jaw, checks, lips, tongue, roof and floor of the mouth when such conditions require pathological exams;
- (3) Surgical procedures to correct Accidental Injuries of the jaws, cheeks, lips, tongue, roof and floor of the mouth;
- (4) Reduction of fractures and dislocations of the jaw;
- (5) External incision and drainage of cellulitis;
- (6) Incision of accessory sinuses, salivary glands or ducts;
- (7) Excision of exostosis of jaws and hard palate;
- (8) Treatment required to repair and restore natural teeth damaged due to Injury. The treatment must be incurred within six months from the date of the Injury. Damage resulting from biting or chewing will not be considered an Injury. Subsequent treatment to an Injured tooth after the initial treatment is not covered. Dental implants are not covered. (Note: A sound natural tooth is one that is organic, not manufactured. Therefore, Injury resulting in damage to bridges, implants, crowns and/or dentures is not covered.), and
- (9) Dental exams performed in preparation for a covered oral surgery.

### LACROSSE SCHOOL DISTRICT RENEWAL EXHIBIT – 7/01/19

	Current Plan	Renewal
Medical		-
Single	\$ 686.00	\$ 652.00
Family	\$1,558.04	\$1,480.00
Medicare -Single	\$ 470.14	\$ 447.00
Medicare –Family	\$ 940.14	\$ 893.00
Medicare – Special	\$1,155.98	\$1,098.00
Medicare – Single (w/o Rx)	\$ 171.36	\$ 163.00
Medicare - Family (w/o Rx)	\$ 342.72	\$ 326.00

By: School District of La Crosse

Signature/Title Exec Director of Busini

By: WCA Group Health Trust

Michael Lamont, COO